LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Division of Environmental Health
2200 St. Marys Ave Lincoln, NE 68502 (402) 471-8000

NON TRANSFERABLE

PERMIT

SEWAGE INSTALLATION

No. 90380065601

Issued 11/08/90
Expires 05/08/91

ESTABLISHMENT

CON URBACH
T9N R5E SEC 27
WEST YANKEE HILL RD

FEES: Permit 018754 $150.00

Total $150.00

Issued By COUNTY HEALTH

PERMITTEE

CON URBACH
RR0001
BOX 00948
DENTON NE 68339

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

DATE	AMOUNT
12/4/90	PAID

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW

RECEIVED NOV 2 9 1990 RECEIVED NOV 0 8 1990

9038000656

FORM 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

A

FILING FEE: $ 150.00

FILE NO. _____

DATE: 10-3-90

The undersigned hereby requests SITE CLEARANCE and PERMIT to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 9N ; Range 5E ; Section 27 ;
   Block _____ : Lot _____ : Addition _____
   Street Address SW98 EASTON WEST YANKEE HILL RD

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐ 1/2M
   No. of Bedrooms 3 . Describe _____

3. Type of Individual Sewage Disposal System: Septic Tank ☐ ; Other ☒

4. Distance to public sewer: 1 1/2 M ~~ft.~~

Don Thluech
Signature of Applicant (Owner or Lessee)

RR#1 DENTON NEBR
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 11/29/90. Date Frwd. 12/4/90. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Noap

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 11-21-90. Date Frwd. _____. ACTION: Approved ☑ Disapproved ☐ Signature: Patty L. Norris

3. City or County Engineer: Date Rec'd. 12/04/90. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☑ Signature: Virgil Beaumont

REMARKS OR REASONS FOR DISAPPROVAL LAGOON MUST BE SEALED.

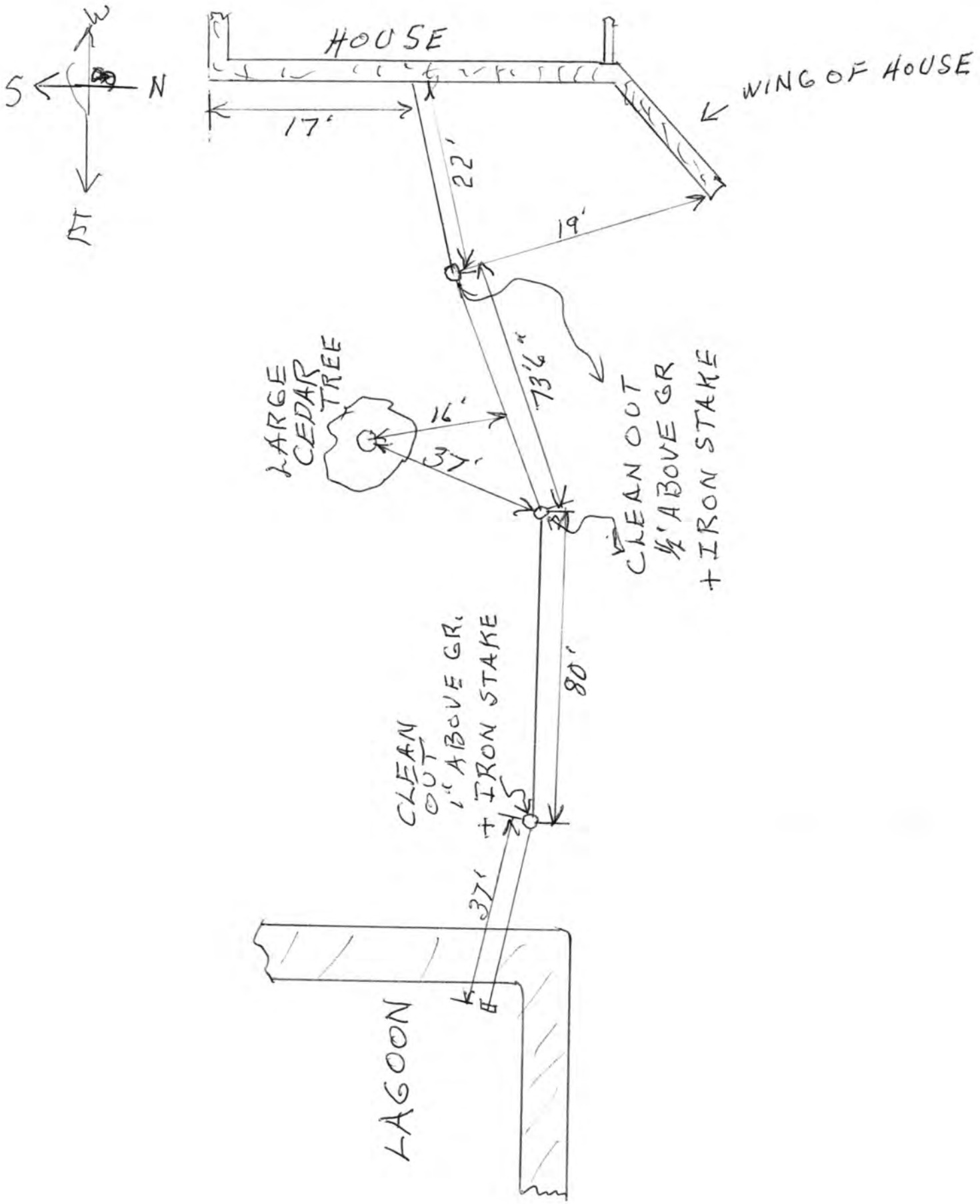
Site Visits:
Date: _____ by: J.C.H.
Date: _____ by: _____
Date: _____ by: _____

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

INSTALLATION FINAL WRITTEN APPROVAL
Date: _____ By: _____

FORM 23-43

NOV 1 2 1997


W
S
N
ST
HOUSE
WING OF HOUSE
17'
22'
19'
LARGE CEDAR TREE
16'
7'
73'6"
CLEAN OUT
½" ABOVE GR
+ IRON STAKE
CLEAN OUT
1" ABOVE GR.
+ IRON STAKE
80'
37'
LAGOON

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET
NON TRANSFERABLE

ENVIRONMENTAL HEALTH DIVISION
Lincoln, NE 68510-1514

(402) 441-8000

PERMIT

Permit

SEWAGE SYSTEM REPAIR
SEWAGE REPAIR

No. 98390060401

Issued 11/16/98
Expires 05/16/99
Revenue Code 3157

FEES: $50.00

TOTAL $50.00

Establishment

MIKE GRIEBEL
T9N R6E SEC 19
YANKEE HILL LAKE BLK 2 LOT 6
7301 SW MALLARD CIRCLE

Permittee

MIKE GRIEBEL
RR0001
BOX 0077G
DENTON NE 68339

Issued By Health Director
Lincoln-Lancaster County Health Department

008293

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW "POST IN A PROMINENT PLACE"

Individual Sewage Disposal System
Application to Alter, Extend or Repair

❒Municipal Code 24.38 ❒County Resolution Number 2832

Date: 11-13-98	File No.:

The undersigned hereby applies for a permit to: ❒ **ALTER** ❒ **EXTEND** ☒ **REPAIR** an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

1. **Legal description of property:**
   Township 9N Range 6E Section 19 1/4 Section _____
   Block 2 Lot 6 Addition Yankee Hill Lake Estates 1st Edition
   Street Address 7301 S.W. mallard Circle

2. **Property use:** ☒ residential ❒ commercial ❒ other use
   Number of bedrooms 3 Describe _____

3. **Type of Present Individual Disposal System:** ❒ septic tank ❒ lagoon ☒ other

4. **Description of proposed alteration, extension or repair:** Add lateral system to supplement experimental system.

5. **Work to be done by:** ❒ owner ☒ contractor's name Melvin Gagner

6. **Estimated project:** a. Repair, replace or minor extension with a cost of less than $400.00 (no fee required).
   b. Total cost is greater than $400.00 (Return fee with this application).
   c. A "construction permit" is required if the use, operation, location, or type of the system is being changed.

Print Name mike Griebel Address 7301 S.W. mallard circle Denton, NE 68339 Phone 402-797-7535
Applicant Signature (owner or lessee) mike Griebel

Please include the permit fee ($50.00) with this application

(Please do not write below this line)

Date rec'd 11/13/98 REVIEW: ☒ approved ❒ disapproved By: Jerrold C. Hood

Site visits:
Date _____ By _____
Date _____ By _____
Date _____ By _____

Installation final written approval
Date 5/27/99 By Jerrold Hood

Return to: Lincoln-Lancaster County Health Department - Environmental Health Division
3140 "N" Street, Lincoln, NE. 68510
441-8022

Rec'd 11/16/98 ck
#5731 $50

White - EH Pink - Business Office Revised 1/98

JERRY Hood

D

Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 26MAY99 Mike Griebel

System Location (Indicate correct number and street)

Address 7301 SW MAHARD (no rural route) City DENTON, NE, Zip 68339

A. Building Sewer

1. Material: _____
   Diameter: _____ in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: _____ in.
3. Distance between dwelling and septic tank: _____ ft.
4. Number of clean-outs: _____
5. Distances to: well or suction line _____ ft.
   stream _____ ft.
   pressure line _____ ft.
   property line _____ ft.

B. Septic Tank

1. Material: _____
   Number of compartments: _____
2. Capacity: _____ gal.
3. Factory built: ☐ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☐ above ☐ below grade _____ in.
5. Inlet: ☐ baffle ☐ tee
6. Outlet: ☐ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: _____ in.
8. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

C. Distribution Box

1. Material: Plastic
   Number available outlets: 7
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 25 ft.

D. Absorption Field

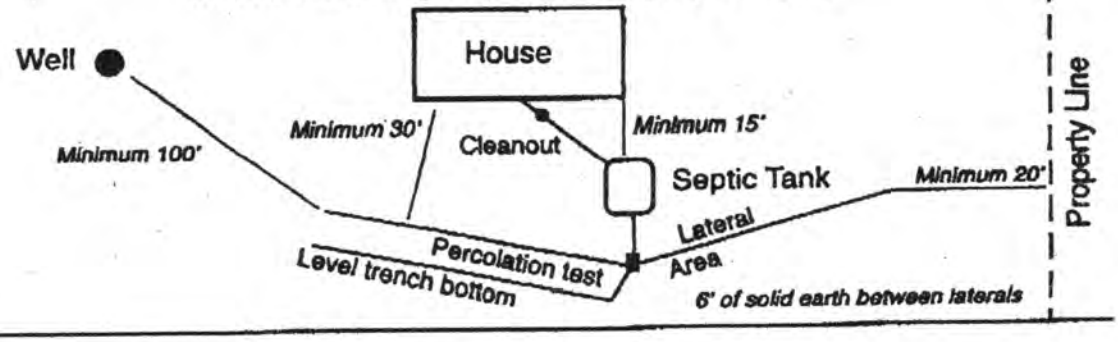
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☒ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: 4"
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 4
   Length of each line: 80 ft. 80 ft.
   80 ft. 80 ft., _____ ft.
3. Trench dimensions: Width 36 ft.
   Slope 3 in/100 ft.
   Average depth 2.8 in
4. Filter material: Gravel
   Depth of material 12 in.
5. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

Complete "As Built" drawing on back of this form.

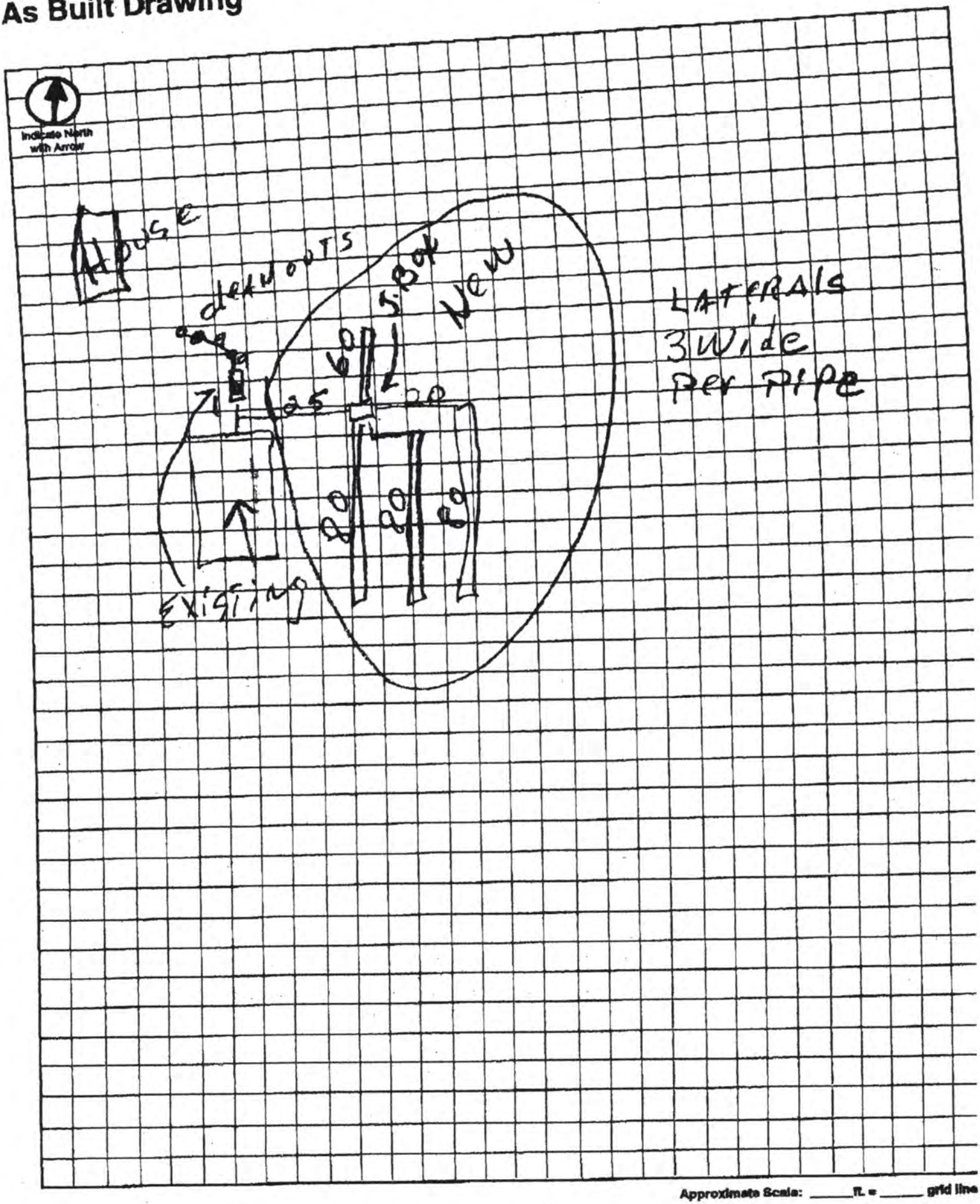
Indicate North with Arrow

Individual Sewage System Design (Example)



JERRY HOOD.

As Built Drawing



Approximate Scale: _____ ft. = _____ grid line